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TRANSMITTAL		Application Number •		10/627,555							
		Filing Date		July 25, 2003							
60RM		First Named Invent	or	Martin S. L	INSELL						
APR 0 7 2005 (to be used to correspondence and initial filing)		Art Unit		1621							
		Examiner Name		Shailendra	Kumar						
Total Number of Pages in This Sources	Attorney Docket Nu	ımber	P-154-US1								
ENCLOSURES (check all that apply)											
Fee Transmittal Form	☐ Drawing(s			After Allowance Communication to TC							
Fee Attached	Licensing	related Papers		Appeal Communication to Board of Appeals and Interferences							
Amendment / Reply	Petition			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)							
After Final		Convert to a al Application		Proprieta	ary Information						
Affidavits/declaration(s)		Attorney, Revocation of Correspondence Add	ess	☐ Status L	etter						
Extension of Time Request		Disclaimer		Other Enclosure(s) (please identify below):							
Express Abandonment Request		Request for Refund CD, Number of CD(s)									
Supplemental Information Disclosure Statement		ndscape Table on CD									
Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR1.52 or 1.53	pages); Information [(10 pages Disclosure); Supplemei Statement b	ntal Information Disclosure by Applicant (1 page); One al for FY 2005 (1 page) and a							
SIG	NATURE OF A	APPLICANT, ATTOR	RNEY, OI	R AGENT							
Firm	Theravance		•								
Signature - Rubuta P. Dayou											
Printed Name	Saxon, Ph. D.										
Date	Reg. No. 43,087										
CERTIFICATE OF MAILING BY EXPRESS MAIL											
I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below. Express Mail Label No.: EV 585317245 US											
Signature Barbara Bryant											
Typed or printed name Barbara	Bryant			Date	April 7, 2005						

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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## Applicant claims small entity status. See 37 CFR 1.27 Examiner Name Shalendra Kurner										
FEE TRANSMITTAL Filing Date July 25, 2003 Fest Named Inventor Filing Date July 26, 2003 Fest Named Inventor July 26, 2003 July 27, 2003 July 28, 2003 Fest Named Inventor July 28, 2003 Fest Named Inventor July 28, 2003 July	FEE TRANSMITTAL). L	Complete if Known					
### Application Type Fee (5) Fee(5) Fee(5				Appli	cation Number	10/627,555				
Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (5) 180.00 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify) :				Filing	Date	July 25, 2003				
METHOD OF PAYMENT (check all that apply)				First	Named Inventor	Martin S. LINSEL	L			
METHOD OF PAYMENT (check all that apply)	Applicant claims	Applicant claims small entity status. See 37 CFR 1.27			niner Name	Shailendra Kuma	r			
METHOD OF PAYMENT (check all that apply) Check					Art Unit 1621					
Check	TOTAL AMOUNT OF	PAYMENT	(\$) 180.00	Attor	ney Docket No.	P-154-US1				
Deposit Account Deposit Account Number: 50-0344 Deposit Account Name: Theravance, Inc. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee Charge fee(s) midicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee Credit any overpayments Under 37 CFR 1.18 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES SEARCH FEES SEARIL Entity Application Type Fee (\$) F	METHOD OF PAYN	MENT (check a	ill that apply)							
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Charge fee(s) indicated below	Deposit Account	Deposit Accour	nt Number: 50-0344		_ Deposit Acc	ount Name: The	ravance, Inc.			
Charge any additional fee(s) or underpayments of fee(s)	For the above	ve-identified dep	osit account, the Director	r is hereb	y authorized to:	(check all that ap	pply)			
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Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee(\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee(\$) Fee Paid (\$) - 3 or HP =		0 (including Rei	ssues)							
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HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = / 50 = (round up to a whole number) x = 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Fee Code 1806: Information Disclosure Statement submission \$\frac{180.00}{\$180.00}\$ SUBMITTED BY Signature Registration No. (Altomey/Agent) 43,087 Telephone (650) 808-60			Claims Fee(\$)	<u>Fe</u>	ee Paid (\$)					
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) ———————————————————————————————————				= _	<u>_</u>					
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = / 50 = (round up to a whole number) x = 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Fee Code 1806: Information Disclosure Statement submission \$180.00 SUBMITTED BY Registration No. (Attorney/Agent) 43,087 Telephone (650) 808-60	_	•	claims paid for, if greater that	an 3.						
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	Signature	KABUIL	a P. Days	in	ı ·	43,087	Telephor	ne (650) 808-600		
	Name (Print/Type)	Roberta P. Sax	kon, Ph. D.				Date	April <u> </u>		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.